



TOWN OF EAST HAMPTON

159 Pantigo Road
East Hampton, New York 11937
Office: (631)324-2417
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John Rooney
Superintendent of Recreation

2016 YOUTH PARK CLINICS

From June 29 through August 13 there will be a variety of youth sports clinics held at the Abraham's Path Youth Park & Terry King Ball Field.

June 27th – August 18th

Tennis Clinic

Grades	Monday	Tuesday	Wednesday	Thursday
K-1 st		6-7pm		6-7pm
2 nd - 3 rd	6-7pm		6-7pm	
4 th - 5 th		7-8pm		7-8pm
6 th - Up	7-8pm		7-8pm	

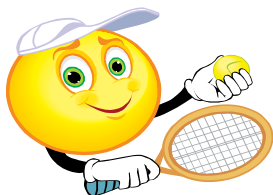
Basketball Clinic

Grades	Monday	Tuesday	Wednesday	Thursday
K-1 st	5-6pm		5-6pm	
2 nd - 3 rd		5-6pm		5-6pm
4 th - 5 th	6-8pm		6-8pm	
6 th - Up		6-8pm		6-8pm

**\$45.00 Per Child for Each Session or
\$60.00 for Both Tennis and Basketball**

Register at Parks and Recreation Department or Montauk Playhouse

www.ehmptonny.gov



Town Of East Hampton Waiver of Liability

PLEASE PRINT NEATLY AND CLEARLY ALL INFORMATION BELOW!

As parent/guardian for _____ (name(s) of child/children enrolling).

I hereby grant permission for his/her participation in the "EAST HAMPTON TOWN PROGRAM " sponsored and administered by the TOWN OF EAST HAMPTON.

In doing so, I understand that physical activities such as these sometimes result in accidents despite the best efforts of the organizer to supervise the participants. I accept any medical bills resulting from such an accident as solely my responsibility.

Further, in permitting my childs/childrens' participation, I agree to hold the TOWN OF EAST HAMPTON, its employees, volunteers assisting with the program as well as its elected and appointed officials, harmless from liability resulting from, my childs/childrens' participation in the program.

VERY IMPORTANT TO WRITE & PRINT CLEARLY

Names of children:

Sex: ____ Male ____ Female	Sex: ____ Male ____ Female	Sex: ____ Male ____ Female	Sex: ____ Male ____ Female
GRADE: ____	GRADE: ____	GRADE: ____	GRADE: ____
AGE: ____	AGE: ____	AGE: ____	AGE: ____

Address: _____

Telephone #: _____ **Cell Phone #:** _____

E-Mail: _____

Date: / /

Parent/Guardian Signature: _____

Parent/Guardian Print Name: _____